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Personlighetsforstyrrelser med hovedvekt på narsissistisk problematikk i relasjon til barn
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DSM 5 og Narsissistisk forstyrrelse.

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Med linker: <http://www.sakkyndig.com/psykologi/artikler/dsw5narsissisme.htm>
Utskriftsvennlig : <http://www.sakkyndig.com/psykologi/artikler/dsm5narsissisme.pdf>

Mer her: <http://www.sakkyndig.com>

I revisjonen av DSM 5 (*Diagnostic and Statistical manual of Mental disorders*), synes det bli en omlegging fra en streng kategorisk (enten/eller) forståelse til en mer dimensjonell (mer eller mindre av) forståelse av personlighetsforstyrrelser. Blant de foreslåtte forandringer finner vi narsissistisk personlighetsforstyrrelse. Under følger en oversikt over dagnes (DSM 4) og den foreslåtte (DSM 5) modell.

Kilde: <http://www.dsm5.org/ProposedRevision/Pages/proposedrevision.aspx?rid=19#>

DSM-IV, nåværende diagnose

T 05 Narcissistic Personality Disorder

Proposed Revision

Rationale

Severity

DSM-IV

Narcissistic Personality Disorder

A pervasive pattern of grandiosity (in fantasy or behavior), need for admiration, and lack of empathy, beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

- (1) has a grandiose sense of self-importance (e.g., exaggerates achievements and talents, expects to be recognized as superior without commensurate achievements)
- (2) is preoccupied with fantasies of unlimited success, power, brilliance, beauty, or ideal love
- (3) believes that he or she is "special" and unique and can only be understood by, or should associate with, other special or high-status people (or institutions)
- (4) requires excessive admiration
- (5) has a sense of entitlement, i.e., unreasonable expectations of especially favorable treatment or automatic compliance with his or her expectations
- (6) is interpersonally exploitative, i.e., takes advantage of others to achieve his or her own ends
- (7) lacks empathy: is unwilling to recognize or identify with the feelings and needs of others
- (8) is often envious of others or believes that others are envious of him or her
- (9) shows arrogant, haughty behaviors or attitudes

Narsissistisk personlighetsforstyrrelse

Et vedvarende mønster av grandiositet (i fantasi eller atferd), behov for beundring og mangel på empati, som begynner i tidlig voksen alder, og er til stede i en rekke sammenhenger, som indikert av fem (eller flere) av følgende:

- (1) Har en grandios oppfatning av egen betydning (for eksempel, overdriver prestasjoner og talenter, forventer å bli anerkjent som overlegen uten tilsvarende prestasjoner)
- (2) Er opptatt med fantasier om ubegrenset suksess, makt, glans, skjønnhet, eller ideelle kjærlighet
- (3) Mener at han eller hun er "spesiell" og unik og kan bare forstås av, eller skal omgås, andre spesielle eller høy-status folk (eller institusjoner)
- (4) Krever overdreven beundring
- (5) Har en følelse av rettigheter, dvs. urimelige forventninger til spesielt gunstig behandling eller automatisk samsvar med hans eller hennes forventninger
- (6) Er mellommenneskelig utnyttende, dvs. utnytter andre til å oppnå sine egne formål
- (7) Mangler empati: er uvillige til å gjenkjenne eller identifisere seg med følelsene og behovene til andre
- (8) Er ofte misunnelig på andre eller tror at andre er misunnelig på ham eller henne
- (9) Viser arrogant, overlegen atferd eller holdninger

DSM-V

T 05 Narcissistic Personality Disorder

Proposed Revision

Rationale

Severity

DSM-IV

Updated June 21, 2011

The essential features of a personality disorder are impairments in personality (self and interpersonal) functioning and the presence of pathological personality traits. To diagnose narcissistic personality disorder, the following criteria must be met:

- A. Significant impairments in **personality functioning** manifest by:
1. Impairments in **self functioning** (a or b):
 - a. **Identity**: Excessive reference to others for self-definition and self-esteem regulation; exaggerated self-appraisal may be inflated or deflated, or vacillate between extremes; emotional regulation mirrors fluctuations in self-esteem.
 - b. **Self-direction**: Goal-setting is based on gaining approval from others; personal standards are unreasonably high in order to see oneself as exceptional, or too low based on a sense of entitlement; often unaware of own motivations.
- AND
2. Impairments in **interpersonal functioning** (a or b):
 - a. **Empathy**: Impaired ability to recognize or identify with the feelings and needs of others; excessively attuned to reactions of others, but only if perceived as relevant to self; over- or underestimate of own effect on others.
 - b. **Intimacy**: Relationships largely superficial and exist to serve self-esteem regulation; mutuality constrained by little genuine interest in others' experiences and predominance of a need for personal gain.
- B. Pathological **personality traits** in the following domain:
1. **Antagonism**, characterized by:
 - a. **Grandiosity**: Feelings of entitlement, either overt or covert; self-centeredness; firmly holding to the belief that one is better than others; condescending toward others.
 - b. **Attention seeking**: Excessive attempts to attract and be the focus of the attention of others; admiration seeking.
- C. The impairments in personality functioning and the individual's personality trait expression are relatively stable across time and consistent across situations.
- D. The impairments in personality functioning and the individual's personality trait expression are not better understood as normative for the individual's developmental stage or socio-cultural environment.
- E. The impairments in personality functioning and the individual's personality trait expression are not solely due to the direct physiological effects of a substance (e.g., a drug of abuse, medication) or a general medical condition (e.g., severe head trauma).

De viktigste trekk ved en personlighetsforstyrrelse er problemer i personlig (selv og mellommenneskelig) fungering og tilstedeværelsen av patologiske personlighetstrekk. For å diagnostisere narsissistisk personlighetsforstyrrelse, må følgende kriterier være oppfylt:

A. Vesentlige problemer i personligheten som kommer til syne ved:

1. Problemer i Selv fungering (a eller b):

a. Identitet:

- overdreven henvisning til andre for selvbeskrivelse og regulering av selvfølelse;
- urealistisk selv vurdering kan være overvurdert eller undervurdert, eller vakle mellom ytterpunktene;
- emosjonell regulering speiler svingninger i selvfølelse.

b. Selv retning:

- målsetting er basert på å få aksept fra andre;
- personlige standarder er urimelig høye for å se på seg selv som eksepsjonell, eller for lav basert på en følelse av berettigelse;
- ofte uvitende om egen motivasjon.

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2. Problemer i mellommenneskelige fungering (a eller b):

a. Empati:

- redusert evne til å gjenkjenne eller identifisere seg med andres følelser og behov;
- svært vår for andres reaksjoner, men bare hvis de oppfattes som relevant for eget Selv;
- over eller undervurdering av egen effekt på andre.

b. Intimitet:

- relasjoner i stor grad overfladiske og eksisterer for å tjene egen regulering av selv tillit;
- gjensidighet hemmet av lite ekte interesse for andres erfaringer og overvekt av behov for personlig vinning.

B. Patologiske personlighetstrekk i følgende domene:

1. Antagonisme [fiendtlighet], kjennetegnet ved:

a. Grandiositet:

- følelser av berettigelse, enten åpen eller skjult,
- selvsentrert;
- tvholder på at man er bedre enn andre;
- nedlatende mot andre.

b. Oppmerksomhets søking:

- overdrevne forsøk på å tiltrekke seg og være fokus for oppmerksomhet fra andre;
- beundrings søkende.

C. Problemer i personlighetsfungering og individets personlighetstrekk er

relativt stabile over tid og konsistente på tvers av situasjoner.

D. Problemer i personlighetsfungering og individets personlighetstrekk er ikke bedre forstått som uttrykk for den enkeltes utviklingsstadium eller sosiokulturelle miljø.

E. Problemer i personlighetsfungering og individets personlighetstrekk skyldes ikke utelukkende direkte fysiologiske effekter av et stoff (for eksempel et stoffmisbruk, medisiner) eller en generell medisinsk tilstand (for eksempel alvorlig hodeskade).

Som vi kan se i DSM 5, går diagnostiseringen av narsissistisk personlighetsforstyrrelse i retning av en dimensjonell forståelse. Det er ikke lenger snakk om enten eller ved en gitt skår, det er snakk om hvor mye man har av dysfunksjonele problemer og adferd knyttet mot identitet og Selv-fungering. Dette underbygger særlig det fundamentale problem ved narsissisters skader rundt **Selvet**:

<http://www.youtube.com/watch?v=pXbPJ2b4nXM>

Narsissistisk forstyrrelse er nært knyttet mot krenkelse av eget selvbilde. Alt som påvirker identitet og Selvutvikling vil ha betydning for graden av narsissistisk forstyrrelse (sårbarhet).

"Det patogene ligger i oppvestmiljøet. Det er omsorgspersonens personlighet som er avgjørende. Det vil si deres evne over tid til å fungere som gode nok Selvobjekter"

Karterud (2002:114) Fra narsissime til selvpsykologi

"Kohut (1971) believe that narcissistic personality disorder arises largely from a profound failure in modeling empathy by the parent early in a child's development"

Durand V.M. & al. (2010:458) Essentials of abnormal psychology

Levels of Personality Functioning

Proposed Revision

Rationale

Severity

DSM-IV

Updated June 21, 2011

LEVELS OF PERSONALITY FUNCTIONING

Self and Interpersonal Functioning Dimensional Definition

A review of the empirical literature on the dimensional models pertinent to individuals' mental representations of self and others (Bender et al., in press), and subsequent empirical analyses (Morey et al., in press), suggest that the following components are most central in comprising a personality functioning continuum:

Self:

Identity: Experience of oneself as unique, with clear boundaries between self and others; stability of self-esteem and accuracy of self-appraisal; capacity for, and ability to regulate, a range of emotional experience

Self-direction: Pursuit of coherent and meaningful short-term and life goals; utilization of constructive and prosocial internal standards of behavior; ability to self-reflect productively

Interpersonal:

Empathy: Comprehension and appreciation of others' experiences and motivations; tolerance of differing perspectives; understanding of the effects of own behavior on others

Intimacy: Depth and duration of positive connections with others; desire and capacity for closeness; mutuality of regard reflected in interpersonal behavior

Self and Interpersonal Functioning Continuum

Although the degree of disturbance in the self and interpersonal domains is continuously distributed, it nonetheless is useful to consider levels of impairment in functioning for efficient clinical characterization and for treatment planning and prognosis. Patients' understanding of self and others affects the nature of interaction with mental health professionals and can have a significant impact on treatment efficacy and outcome. The following continuum uses each of the dimensions listed above to differentiate five levels of self-interpersonal functioning impairment, ranging from no impairment, i.e., healthy functioning (Level = 0) to extreme impairment (Level = 4).

Kilde: <http://www.dsm5.org/ProposedRevisions/pages/proposedrevision.aspx?rid=468>

Please indicate the level that most closely characterizes the patient's functioning in the self and interpersonal domain:

Level	SELF		INTERPERSONAL	
	Identity	Self-Direction	Empathy	Intimacy
0	<p>-Ongoing awareness of a unique self; maintains role-appropriate boundaries.</p> <p>-Consistent and self-regulated positive self-esteem, with accurate self-appraisal.</p> <p>-Capable of experiencing, tolerating and regulating a full range of emotions.</p>	<p>-Sets and aspires to reasonable goals based on a realistic assessment of personal capacities.</p> <p>-Utilizes appropriate standards of behavior, attaining fulfillment in multiple realms.</p> <p>-Can reflect on, and make constructive meaning of, internal experience.</p>	<p>-Capable of accurately understanding others' experiences and motivations in most situations.</p> <p>-Comprehends and appreciates others' perspectives, even if disagreeing.</p> <p>-Is aware of the effect of own actions on others.</p>	<p>-Maintains multiple satisfying and enduring relationships in personal and community life.</p> <p>-Desires and engages in a number of caring, close and reciprocal relationships.</p> <p>-Strives for cooperation and mutual benefit and flexibly responds to a range of others' ideas, emotions and behaviors.</p>
1	<p>-Relatively intact sense of self, with some decrease in clarity of boundaries when strong emotions and mental distress are experienced.</p> <p>-Self-esteem diminished at times, with overly critical or somewhat distorted self-appraisal.</p> <p>-Strong emotions may be distressing, associated with a restriction in range of emotional experience.</p>	<p>-Excessively goal-directed, somewhat goal-inhibited, or conflicted about goals.</p> <p>-May have an unrealistic or socially inappropriate set of personal standards, limiting some aspects of fulfillment.</p> <p>-Able to reflect upon internal experiences, but may overemphasize a single (e.g., intellectual, emotional) type of self-knowledge.</p>	<p>-Somewhat compromised in ability to appreciate and understand others' experiences; may tend to see others as having unreasonable expectations or a wish for control.</p> <p>-Although capable of considering and understanding different perspectives, resists doing so.</p> <p>-Inconsistent is awareness of effect of own behavior on others.</p>	<p>-Able to establish enduring relationships in personal and community life, with some limitations on degree of depth and satisfaction.</p> <p>-Capacity and desire to form intimate and reciprocal relationships, but may be inhibited in meaningful expression and sometimes constrained if intense emotions or conflicts arise.</p> <p>-Cooperation may be inhibited by unrealistic standards; somewhat limited in ability to respect or respond to others' ideas, emotions and behaviors.</p>
2	<p>-Excessive dependence on others for identity definition, with compromised boundary delineation.</p> <p>-Vulnerable self-esteem controlled by exaggerated concern about external evaluation, with a wish for approval. Sense of incompleteness or inferiority, with compensatory inflated, or deflated, self-appraisal.</p> <p>-Emotional regulation depends on positive external appraisal. Threats to self-esteem may engender strong emotions such as rage or shame.</p>	<p>-Goals are more often a means of gaining external approval than self-generated, and thus may lack coherence and/or stability.</p> <p>-Personal standards may be unreasonably high (e.g., a need to be special or please others) or low (e.g., not consonant with prevailing social values). Fulfillment is compromised by a sense of lack of authenticity.</p> <p>-Impaired capacity to reflect upon internal experience.</p>	<p>-Hyper-attuned to the experience of others, but only with respect to perceived relevance to self.</p> <p>-Excessively self-referential; significantly compromised ability to appreciate and understand others' experiences and to consider alternative perspectives.</p> <p>-Generally unaware of or unconcerned about effect of own behavior on others, or unrealistic appraisal of own effect.</p>	<p>-Capacity and desire to form relationships in personal and community life, but connections may be largely superficial.</p> <p>-Intimate relationships are largely based on meeting self-regulatory and self-esteem needs, with an unrealistic expectation of being perfectly understood by others.</p> <p>-Tends not to view relationships in reciprocal terms, and cooperates predominantly for personal gain.</p>

3	<p>-A weak sense of autonomy/agency; experience of a lack of identity, or emptiness. Boundary definition is poor or rigid: may be over identification with others, overemphasis on independence from others, or vacillation between these.</p> <p>-Fragile self-esteem is easily influenced by events, and self-image lacks coherence. Self-appraisal is un-nuanced: self-loathing, self-aggrandizing, or an illogical, unrealistic combination.</p> <p>-Emotions may be rapidly shifting or a chronic, unwavering feeling of despair.</p>	<p>-Difficulty establishing and/or achieving personal goals.</p> <p>-Internal standards for behavior are unclear or contradictory. Life is experienced as meaningless or dangerous.</p> <p>-Significantly compromised ability to reflect upon and understand own mental processes.</p>	<p>-Ability to consider and understand the thoughts, feelings and behavior of other people is significantly limited; may discern very specific aspects of others' experience, particularly vulnerabilities and suffering.</p> <p>-Generally unable to consider alternative perspectives; highly threatened by differences of opinion or alternative viewpoints.</p> <p>-Confusion or unawareness of impact of own actions on others; often bewildered about peoples' thoughts and actions, with destructive motivations frequently misattributed to others.</p>	<p>-Some desire to form relationships in community and personal life is present, but capacity for positive and enduring connection is significantly impaired.</p> <p>-Relationships are based on a strong belief in the absolute need for the intimate other(s), and/or expectations of abandonment or abuse. Feelings about intimate involvement with others alternate between fear/rejection and desperate desire for connection.</p> <p>-Little mutuality: others are conceptualized primarily in terms of how they affect the self (negatively or positively); cooperative efforts are often disrupted due to the perception of slights from others.</p>
4	<p>-Experience of a unique self and sense of agency/autonomy are virtually absent, or are organized around perceived external persecution. Boundaries with others are confused or lacking.</p> <p>-Weak or distorted self-image easily threatened by interactions with others; significant distortions and confusion around self-appraisal.</p> <p>-Emotions not congruent with context or internal experience. Hatred and aggression may be dominant affects, although they may be disavowed and attributed to others.</p>	<p>-Poor differentiation of thoughts from actions, so goal-setting ability is severely compromised, with unrealistic or incoherent goals.</p> <p>-Internal standards for behavior are virtually lacking. Genuine fulfillment is virtually inconceivable.</p> <p>-Profound inability to constructively reflect upon own experience. Personal motivations may be unrecognized and/or experienced as external to self.</p>	<p>-Pronounced inability to consider and understand others' experience and motivation.</p> <p>-Attention to others' perspectives virtually absent (attention is hypervigilant, focused on need-fulfillment and harm avoidance).</p> <p>-Social interactions can be confusing and disorienting.</p>	<p>-Desire for affiliation is limited because of profound disinterest or expectation of harm. Engagement with others is detached, disorganized or consistently negative.</p> <p>-Relationships are conceptualized almost exclusively in terms of their ability to provide comfort or inflict pain and suffering.</p> <p>-Social/interpersonal behavior is not reciprocal; rather, it seeks fulfillment of basic needs or escape from pain.</p>